

4048



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4048 Name Jordan Goudie Corps Third

### Questions to be put to the Recruit before Enlistment

- 1. What is your name? ..... 1. Jordan Goudie
- 2. What is your full Address? ..... 2. Port Antonio N.D. Bay
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 20 Years 3 Months
- 5. What is your Trade or Calling? ..... 5. Soldier
- 6. Are you Married? ..... 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? ..... } 8. Yes
- 9. Are you willing to be enlisted for General Service? ..... } 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name .....  
Corps .....
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... } 11. Yes

I, Jordan Goudie do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Jordan Goudie SIGNATURE OF RECRUIT.  
Robert Peel Signature of Witness.

**OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.**

I, Jordan Goudie do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

**CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.**

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at.....  
on this... 31 day of... Oct 1917

Signature of Attesting Officer Robert Peel

**† CERTIFICATE OF APPROVING OFFICER.**

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....

If enlisted by special authority, such will be attached to the original attestation.

Date..... 191..... } Approving Officer.  
Place..... }  
St John's

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
† Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

# DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Jordan Jordan  
 Apparent age 20 years 3 months. Height 5 feet 11 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 3 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph Jordan  
Post. Anson N.D. Bay. | Relationship Father

### Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.	(b) Place and date of marriage.	(c) Present address.	(d) Initials of Officer verifying entry.

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>31-10-17.</u>									
Joined at <u>St. John's</u> on <u>October 31-10-17</u>									
<u>Discharged July 15. 1919</u>									
		<u>Embarked St. John's N.S. Messuabie</u>		<u>11-12-17</u>					<u>Embarked for B.C.S. 25<sup>5</sup>/18.</u>
		<u>Disembarked France 24-5-18</u>		<u>Joined Battalion 31-5-18.</u>					<u>Ordered to report to depot Winnipeg 22<sup>4</sup>/19</u>
		<u>while on leave from B.C.S. 22<sup>4</sup>/19</u>		<u>to file for demobilization 22-5-19.</u>					<u>Arrived Newfoundland 1-6-19</u>
		<u>Demobilization St. John's</u>		<u>15-7-19</u>					
Total Service forfeited as above.....									

Total Service towards Engagement to 15-7-19 [date of discharge] 1 years 258 days  
 " " Pensions " " " " " " " " " " " "

C.R!

4248

Kind protest  
Nov 9 11/19

Exploit's

Nov 4/19

Minister of Militia  
St Johns

Dear Sir

As I have noticed that there  
are an issue of "General  
Service Ribband. I am  
now writing for my issue  
as I cannot appear at the  
room for it. my no is  
4248 pte John Budgett  
please forward same  
as I am entitled to it as  
well as any other man  
I am yours most truly  
John Budgett







C.R. 4048

extract from Daily Orders Part II Royal Newfoundland Regiment  
Depot St. John's dated 17-7-19.

The discharge of the undernoted on de mobilization has been  
CONFIRMED by officer i/c Records from noted date  
12-7-19.

4048, Pte. Jordan Goudie.

C.R. 4048

Extract from Daily Orders Part 11, The Royal Wfld. Regt.  
St. John's, June 20th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by C.O. Discharge Depot with effect from 1-7-19.

4048 Pts. J.Goudie.



C.R. 4048

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 56 Sent by J.D. Rec'd by \_\_\_\_\_ Check 10/ No. \_\_\_\_\_

Place from Roberts Arm 2

To Min Militia



*1 copy*

Please advise if no  
4050 pte Edwin Martin  
& Jordan Gaudie arrived  
by Corsican Reply  
immediately.

Charles Martin

4048 Pte J. Gaudie yes  
4050 Pte E. Martin yes

K.P.



**NEWFOUNDLAND POSTAL TELEGRAPHS.**

C P 4048

**Cable Connection with all the World**

**All Messages Sent are Subject to the Following Conditions:**

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated

June 2nd. 1919.

Charles Martin, Roberts Arm.

BEG TO ADVISE YOU 4048 GOUDIE AND 4050 MARTIN

ARRIVED BY CORSICAN

A. E. HIGHMAN

MINISTER OF MILITIA.

CHANGE TO DEPT. OF MILITIA.

FOR TYPEWRITER

C.R. 4048

Extract from Daily Orders Part 11 Depot, St. Johns,

Date June 18th 1919.

4048, Pte. J. Goudie.

Reported at Headquarters 1/6/19.

which sailed Liverpool May 22/1919.

ex "Corsican"

C.R. 4048

Extract from Casualties received from Pay & Record Office,  
London, April 24th, 1919.

The undermentioned, who was on leave from the B.E.F. reported  
at the P.&R.O., on 22-4-19 and was instructed to report to  
Depot, Winchester, ~~XXXXX~~ same date

4048 Pte. J?Goudie.



C.R. 4048

Extract of Nominal Roll Draft, (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone.

4048 Pte. J. Goudie.

25-5-18.



C.R. 4048

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Drafts No. 48, -120 Other Ranks from 3rd  
Bn., Depot, Winchester, to 1st. Battn., The Royal Newfoundland Regiment  
B.E.F. Embarked Folkestone, 25/5/18.

4048 Pte. J. Goudie.

A.Fs. B. 103 (one for each  
soldier) sent to 3rd. Echelon  
B.E.F.

C.R. 4048

Extract from Nominal Roll Embarked St. John(s) fro Overseas,  
Per S.S. "Florizel" Dec. 11, 1917.

#4048 PT.E J. GOUDY.

C.R. 4048

Extract from Daily Orders sent to Unit The Royal Welch  
Regt., St. John's, Oct. 31st, 1917.

4048 Pte. J. Goudie.

Attested for General Service with the 1st Welsh Regt.,  
with effect from Oct. 31st, 1917.

Goudie, J.

C.R. 4048

P.V.R.O.







No. 6630/513

NEWFOUNDLAND CONTINGENT

N.F.P./79

From: Chief Paymaster & O. i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding,  
2/Bn Royal Newfoundland Regt.,  
Winchester.

30th April 1918

May 8<sup>th</sup> 1918

Subject: 4048, Pte. J. Goudie,

With reference to the following telegram (3798) from the Hon. Minister of Militia, received

26/4/18 in your favour by  
pay to 4048 Goudie £3:9:0

Draft £3:9:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. D. ... Maj.*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

Officer Comdg. Battn  
1st Newfoundland Regiment

Received the sum of Three  
Pounds ~~the following~~ account of  
cable remittance from Newfoundland.

*J. Goudie*  
Chief Paymaster & O. i/c Records.  
No. \_\_\_\_\_ Rank \_\_\_\_\_

NOTE: - Receipt is not required.



No. 4048 Rank Plt

Name Gardie J.

Pay	F.A.	W.P.	Total
1.00	10		1.10
Less Allowment			.60
Net Rate			.50

N.T.P./58

*Recd.*

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	P	A	W	K	C	2
		From	To												
Balance					Balance										9 16 2
Acquittance Rolls		6	7	10	Pay @ Net Rate	21 <sup>19</sup> / <sub>19</sub>	7 <sup>4</sup> / <sub>19</sub>	108	.50	54	00	11			1 11
Hospital Advances					R.A. 5 <sup>4</sup> / <sub>19</sub> to 20 <sup>4</sup> / <sub>19</sub>			14	1/9						1 4 6
A.B. 64. <i>60 francs</i>		2	6	0											22.2.7
P.&.R.O. Payments															
<i>8.13.10</i>					<i>£ Bal.</i>	<i>8<sup>4</sup>/<sub>19</sub></i>	<i>27<sup>4</sup>/<sub>19</sub></i>	<i>15</i>	<i>50</i>	<i>7</i>	<i>50</i>	<i>1</i>	<i>10</i>	<i>10</i>	<i>£24-13-5</i>
<i>11764</i> Cash Receipt <del>1919</del>	<i>7<sup>4</sup>/<sub>19</sub></i>	<i>13</i>	<i>8</i>	<i>0</i>	<i>10</i>										
<i>22</i> Cash R. 2101	<i>28<sup>4</sup>/<sub>19</sub></i>	<i>1</i>	<i>11</i>	<i>7</i>	<i>7</i>										

*W.D.*  
*7.4.19*

NEW FOR...

No. of Sheets



No. 7752/355

*B 1000*

*099977*

N.F.P. 176.

From: NEWFOUNDLAND CONTINGENT

Chief Paymaster & O. i/c Records,  
Newfoundland Contingent,  
Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding Depot  
1st Batt. Ryl. Mtd. Regiment  
Winchester.

20th May 1919

*May 21st* 1919.

4048 Pte. J. Goudie

With reference to the following telegram from the Minister of Militia / / 19 ( ):

Receipt hereunder.

*Valeria Cape J*  
Officer Commdg. 1st Batt'n.

"Pay to- 4048 J. Goudie  
£7. 16. 0.

Cheque £ 7. 16. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of Seven pounds  
Sixteen shillings (7-16-0) respect of telegraphic remittance from the Minister of Militia.

*A. J. ...*  
Chief Paymaster & O. i/c Records.

*J. Goudie*  
No. 4048 Rank Pte.

Witness: *A. Bayly* 8/592

20929/666

Royal Nfld. Regt.  
B. E. F.

17th December 8

4048, Pte. J. Goudie,

10881

Pay to 4048 Goudie £8:4:0

*18.12.18*

**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps *Royal Newfoundland*, 7. Former Trade or Occupation } *Farmer*
2. Regtl. No. *4048* 3. Rank *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Goudie* *Jordan* (a) Former Regts. or Corps ; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday *21*
6. Posted for duty on *Nov 21/17* at *St. Johns* in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty ? (b) Date of Discharge ;
9. If a Court of Inquiry was held on an injury state :— (c) Cause of Discharge.
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.

*nil*

12. Place of origin of disability.

*nil*

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*nil*

*nil*



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | } na.               | .....             |
| (ii.) Previous active service.. .. .                       |                     | .....             |
| (iii.) Climate in pre-war service .. .. .                  |                     | .....             |
| (iv.) Ordinary military service before the war .. .. .     |                     | .....             |
| (v.) Serious negligence or misconduct on the man's part. } |                     | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } na.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
 (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

no complaint of no disability.

16. Was an operation performed? If so, when and what was its nature? na.
17. If not, was an operation advised and declined? na.
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? na.
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? na.

20. Do you recommend—  
 (a) Discharge as permanently unfit?  
 (b) Change to United Kingdom?

Repatriation

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W. P. Proennia *Capt R.A.M.C.*  
 Medical Officer in charge of case.

Station *Fazley B. Camp*

Date *30. 11. 19.*

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

Louise, J

H048

Ray Sept.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4048 Rank Pvt Name Gondie J  
 Intended place of residence Port Cansu  
 2. Occupation Insurer  
 Classification of soldier 3 Medical Category A1

3. The above named man is discharged in consequence of  
**DEMOBILIZATION**  
**Eligible for War Service Gratuity**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place, ST. JOHN'S  
 Date JUN 17 1919  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S  
 Date JUN 17 1919  
 Signature of soldier  
 Signature of witness

## CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date JUN 17 1919  
 Signature of soldier  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 31-10-17 No. of days on Military  
 Discharged from service 1-7-19 Plus 14 days Service 623

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S  
 Date JUL 1 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place, ST. JOHN'S  
 Date July 15 1919  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

*A.G.B 2079/3029*



July 15, 1919

#4048 Pte. Jordan Goudie,

Port Anson, N.D.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3029.

Yours truly

Captain,  
Paymaster & O.i/c Records

# The Royal Newfoundland Regiment

Class for Demobilization: 2

Report of Demobilization  
Travelling Board, held on soldier for  
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 16.6.19

Regimental No. 40448

Name Gouhis Jordan

Rank Pl

Address Port Jonson N. D. Bay

Present Medical Category A i

Recommended for:— (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R. H. Last Major  
O.C. Discharge Depot.

J. Paterson  
Senior Medical Officer

Geo. Burden  
~~M. O. Depot~~

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4048 Rank Pls Name Loudie J. Gatz  
 Date of Enlistment 31-10-17 Address Port Amoy District Gatz  
 Occupation Fisherman Classification for Discharge E Medical Category A1  
 Recommendation S. M. B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 16-6-19 O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.

[Signature: J. Gatz]

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable #60.00

(b) Clothing Supplied [Signature: Mike Luster]

Date 17-6-19

O i/c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 19,1831 to his home at Fort Anson and Release Certificate No. 2875 issued.

Date 17-6-19

*J.A. Snowball*  
Demobilization Officer

**4. Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 15-7-19

Date 17-6-19

*H.M. [Signature]*  
Depot Paymaster.

Discharged approved for 1-7-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

*2 Form B*

Date 17-6-19

*J.A. Snowball*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 1 1919

*R.H. Sait Capt.*

O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date .....

## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation.

*J. J. Pondie*

Signature of Man.

Reg. No. *4048*

*J. A. Snowcraft*

Signature of the Vocational Officer or his Representative.

Place

**ST. JOHN'S.**

Date

*17-6-19*

191

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

# MEDICAL HISTORY

OF

Surname Gindie

Christian Name Jordan

Table I.—GENERAL TABLE.

Birthplace:—Parish Port. Anson N.D. B. County Wfed

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>31</u> day of <u>Oct.</u> 191 <u>7</u>	on	day of	191
	at <u>St. Johns</u>	at		
Declared Age	<u>20</u> years <u>3</u> Mos.		years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>11</u> inches		feet	inches
Weight	<u>140</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded... <u>35</u> inches			inches
	Range of Expansion... <u>3</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V=	
	L.E.—V= <u>6/4</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St. Johns</u>	at		
	on <u>31</u> day of <u>Oct.</u> 191 <u>7</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Regt</u>	<u>4048</u>		
Transferred to	<u>Regt</u>			
Became non-effective by	on	day of	191	on
			day of	191
(Signature)				
(Rank)				





NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

# Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Fusiliers*
2. Regtl. No. *4048* 3. Rank *Plt*
4. Name *Goudie Jordan*  
(Surname) (Christian Names)
5. Age last birthday *21*
6. Posted for duty on *Nov 31/17* at *Pt. 20 hrs*  
 in category (or grade).....
7. Former Trade or Occupation } *Farmer*
- 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps ; with Regtl. Nos.
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (b) Date of Discharge ;  
 (b) Where (c) Cause of Discharge.  
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.  
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil.*
12. Place of origin of disability. *nil.*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil.*

14. State whether the disabilities are
- |  |                     |                   |
|--|---------------------|-------------------|
|  | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war .. .. .                        | .....               | .....             |
| (ii.) Previous active service .. .. .                              | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                          | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .             | .....               | .....             |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | .....               | .....             |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Do. c. 1*  
*Re complaints of no disability*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

16. Was an operation performed? If so, when and what was its nature? *Do. a.*

17. If not, was an operation advised and declined? *Do. a.*

18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *Do. a.*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *Do. a.*

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatrication*

*Sgt. W. J. Proctor*  
*Capl. R. R. R. R.*

Medical Officer in charge of case.

Station .. *Hazley, Mo.*

Date .. *30/1/19*

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause



The Royal Nfld. Regiment

DEMOBILIZATION

No. 4048 Rank

Name *Youder*

Warned for demobilization on

JUN 17 19



## Descriptive Return of a Soldier Discharged on Account of Disability.

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. I. C. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full

*Jordan Goudie*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*4048*

Intended address

*Port Anson, N.S.B.*

Height on discharge

*5 Feet 11*

Color of hair on discharge

*Dark Brown*

Complexion

*Fair*

Color of eyes

*Brown*

Descriptive Marks

Figure on discharge

*medium*

Christian name of Father

*Joseph*

Christian name of Mother

*Sarah*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

*Port Anson, July 3<sup>rd</sup>, 1897*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

*Jordan Goudie**Pt 6*  
(Rank)

Station

*St Johns*

Date

*16-6-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Station

Date



July 21, 1919

#4048 Pte. Jordan Goudie,  
Port Anson, N.D.B.

Dear Sir:-

Referring to your application I enclose cheque for  
seventy dollars (\$70.00), being amount of first payment due  
you on account of the War Service Gratuity.

Yours truly

Captain & Paymaster.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *A. Jordan* 2. Surname *Goudie*

3. Rank *Pvt* 4. Regt. No. *14048*

5. Address in full to which future payments of gratuity are to be forwarded. *Port Auxon, N.B.*

6. Date of enlistment in the Regiment. *Oct 31/17*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. ....

8. Relationship of such dependents. ....

9. Address in full of such dependents. ....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ....

11. Were you on active service only in field. If so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in field or Overseas. *From Oct 31/17*

*To June 17/19* 13. ....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

..... *No* .....

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

..... *No* .....

15. Have you been issued with a War Service Badge?.....

16. Have you, during the present war, served in the Imperial Forces?..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*

(b) If so, was such reversion in consequence of Misconduct or inefficiency?.....

19. Are you now serving in the Regt.?..... If not give? - (a) date of discharge..... *No* (b) Reason for discharge.....

*See 17/1/19* *See 17/1/19*  
*See 17/1/19* *See 17/1/19*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service....

*France, Belgium + Germany - From May 28/18*  
*to April 1919*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

-3- J. J. Gaudie

Signature of Applicant:

Place of Residence:

Declared before me at:

This

17th

day of

June 1919

Port Mason N.B.S.  
St. John's, Nfld.

John McCaffrey

Signature of Berrister of the  
Supreme Court, Stipendiary Legis-  
trate, Notary Public, Justice of the  
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.			War Service Credit.	Net amount due
Date paid	Paid Soldier.	Paid Dependent.		
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.			.....	Paymaster





4048

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British War Medal 1914-1919.

Name, 4048. Cox. Pte. J. Goudie

Date Nov 18. 1919.

Place Port. Anson. Sunday Cove Isld  
N.D.B.

Receipt for Army Book 64

No. .... *4048* Name..... *Gondie* .....

To Certify that I have received the AB 64 of the above  
named soldier.

Name..... *Ernest Gondie* .....

Date..... *Sep 1st - 20* .....

Place..... *Port Canby N.W. Wash.* .....

N.B. For completion and return to the Department of Militia  
Insert in corner of envelope "AB 64"

*W 29 10 22*



**Casualty Form - Active Service.**

Regiment or Corps *2<sup>d</sup> Royal Newfoundland*  
 Rank *Pte* Surname *Gordie* Christian Name *Jordan*  
 Religion *Meth* Age on Enlistment *20* years *3* months  
 Enlisted (a) *31.1.17* Terms of Service (a) *Duration* Service reckons from (a) *31.1.17*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 Occupation *Fisherman* or Corps Trade and rate *25 MAY 1918*  
 Signature *[Signature]* **OFFICER**



Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked <i>25-5-18</i>			
		<i>From</i> Disembarked <i>27-5-18</i>			
		Joined Battalion <i>31-5-18</i>			<i>1</i>
		<i>Leave to W. 5/4/19 to 20/4/19</i>			<i>B.L.S</i>
		<i>Joined Depot, Winchester 29.4.19</i>			

*Jmt*

(a) In the case of a man who has re-engaged for, or enlisted into Section B, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shewing-Smith, &c. W 8635 M2733 20.000 9/17 (38011) C. P. & S., Ltd., Form B/103 E/1897. P.T.O.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121  
39

Regiment of *1<sup>st</sup> Newfoundland*

Number of Sheet *one*

Signature of O. C. Company *W. H. [Signature]*

Regimental No. and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Loudie Jordan</i>	Age on	<i>20</i> years <i>3</i> months	<i>Fisherman</i>	
Joined		Place and Date of Enlistment	<i>St. Johns</i>	Religion	
Joined		Date	<i>21-10-17</i>	<i>meth.</i>	
Joined		Date	Period of	Place of Birth	
Joined	Date	with Colours <i>258</i> years.	with Reserve <i>365</i> years.		

Place	Date of Offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
-------	-----------------	------	----------------------	---------	--------------------	--------------------	---	-----------------	---------

*Demobilized St. Johns, 15<sup>th</sup> 19<sup>17</sup>*

To be carried over.

Army Form B. 121

14048

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4018 Rank Cpl. Name Gaudie J.  
 Date of Enlistment 31-10-17 Address Port Limerick District St. John's  
 Occupation Truckman Classification for Discharge F Medical Category A1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. 1/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 16-6-19 O. C. Discharge Depot [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am..... in a position to resume civilian occupation.

[Signature]

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied [Signature]

Date 17-6-19

O i.c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 211231 to his home at Atkinson and Release Certificate No. 2875 issued.

Date

17-6-19

*J.A. Snowball*  
Demobilization Officer

**4. Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 15-7-19

Date

17-6-19

*H. J. ...*  
Depot Paymaster.

Discharge approved for

1-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st.	" 2
B 178a	D 400A	B 1915	do 2nd.	" 3
B 179	D 400B	Form L.	do 3rd.	" 4
B 179a	D 400C	Form K.	do 4th.	" 5
B 179b	B 103	ME 2.		" 6
B179c	B 120	M 93.		

Date

17-6-19

*J.A. Snowball*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date

JUL 1 1919

*R.H. Sait Capt.*  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date

June 30/19

*[Signature]*  
[Signature]

Reg. No. *4048* Rank *PLC* Name *Wardie J.*

Attested ..... Address *Post Anson*

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas *29.8.19.*

Returned on S.S. *Crossian* Cause *Discharge*

*10.6.19*  
*1.7.19*

PASSED TO DEMOBILIZATION  
DISCHARGE APPROVED ON DEMOBILISATION